New Resource: Updated Registry User Training Video

You asked; we listened! The AACVPR Registry Committee is pleased to announce the launch of the updated Registry User Training Video. As part of the registry training process, all new registry users are required to watch an informational video and complete a practical data entry exercise. We heard from users that they would like a training video that focused more on the day-to-day use of the registry.

Our new and improved registry training video provides new users with an overview of the functionality of the Cardiac and Pulmonary Registry, helpful tips for data collection, entry, and validation, instructions for reviewing reports and patient records and frequently asked questions and management issues that users encounter within the registries.

The video is now live as part of the training process for new users and can also be viewed by current users on the Registry User Resource Page.

Send Us Your Feedback: Registry User Survey Now Live

Your feedback on the registry trainings, registry user resources, and the live registry will help us to improve our offerings for all registry users. We now have a standing registry user feedback survey that programs are invited to complete at any time to help us improve the registry user experience.

New and experienced registry users alike are encouraged to complete the survey here: https://www.surveymonkey.com/r/registryusersurvey. The Registry User Resource Page will also always host a link to the survey at https://www.aacvpr.org/Registry/Registry-User-Resources.

Certifying or Re-certifying this year? Use the Registry Integration to Ease The Process!

If you are planning to complete the Program Certification application this year, don’t forget to use the registry integration to help complete the outcomes sections of the application. View the instructional video on the integration process today to familiarize yourself with the process.

Registry User Spotlight: Chris Schumann and the University of Alabama CardioPulmonary Rehabilitation Programs

Chris Schumann, MS, CEP, RCEP and the CardioPulmonary Rehabilitation program at the University of Alabama at Birmingham in Birmingham, Alabama have been AACVPR Cardiac and Pulmonary Rehabilitation Registry subscribers since June 2015. As most subscribers, we joined the registry for the ability to analyze both patient and program outcomes data. When we first joined the cardiac and pulmonary registries, our team entered patient data into multiple data systems, it was very time consuming. In May 2016, we purchased a new monitoring system with the ability to interface our health systems electronic medical records, monitoring system, and the national registries. The new interfacing capability helped us streamline our data entry process at intake, progress report times, and at program discharge times, improving productivity. The new monitoring system also allows us to generate useful patient outcome reports, same as what you will find in the registry.
The software interfacing allows us to complete patient care electronically. Treatment plans (ITP) are developed in the monitoring system and our patient session reports can be completed and uploaded into the patient medical records for signatures and electronic filing. Progress reports and patient outcomes reports can also be filed in the EMR too. This process has allowed us to almost become completely paperless - Session reports, ITP’s, progress reports, and outcome reports are housed in a cardiopulmonary rehabilitation folder in the EMR for physician and other health care professionals to review. The electronic process provides immediate access to progress reports, outcome reports, and individualized treatment plans; these documents can be signed electronically if needed. Our process is not perfect, but it is very effective when it’s time to complete progress reports and review individual and program outcomes. With this ability, we have been effectively working on a few quality improvement projects. One project we are pleased with is improving our referral to enrollment rates. Using the information entered into our monitoring systems that connects to the registry, we are able to review our cardiac and pulmonary rehab program outcome reports pertaining to referral to enrollment length of time. Along with a 15% increase in enrollment from the previous fiscal year, the referral to enrollment data was valuable information needed to assist in increasing our staffing and revamping our scheduling process (added flexible initial assessment scheduling). The addition of staffing and priority clinic scheduling process has resulted in a decrease in referral to enrollment rates from >40 days to <20 days over the last year. This has also increased our average patient visits from 1588 to 1888 per quarter. We are thankful to have easy access to program outcomes data through the AACVPR Registry to aid us in our program growth process.

It is very important to have a streamlined process for data entry and data retrieval; I feel the technology is now available to help with that process. Discuss with your monitoring system representatives and your institutions IT department on how to interface your EMR, monitoring system, and the AACVPR registries.

Note: LSI, ScottCare, and Quinton telemetry systems have partnered with AACVPR to integrate their systems into the registry, and others are currently under development. Registry users should contact their telemetry vendor with any questions about their connection to the registry.

FAQs

Q: How do I pull a report of all patients (regardless of enrollment or completion status) that match a certain criteria like a Hemoglobin A1c value of over?

A: The Data Extraction Utility in both the Cardiac and Pulmonary Registries will allow registry users to pull an excel that includes all patients entered into the registry, and also to filter patients by various fields to pull a specific population from the registry for comparison. These reports will pull all information entered for these patients in the resulting report. To complete this type of data extraction, please follow the steps below:

- Navigate to the Reports and Data tab within the registry.
- Select Data Extraction from the dropdown menu that appears below Reports and Data.
- Select your desired criteria within the Filter Utility. For example, if you are looking for patients with a specific HgbA1c, you can find the HgbA1c option under the Glucose Measurements section, and then set the filter value to whatever HgbA1c value you would like. If you would like to pull all of the records that have been entered between specific dates, you may use the Intake Information section to filter patients by referral date or enrollment date. If you would just like to see all of the records that you have entered into the registry, you can leave the filter utility section blank.
- Click on the Generate Excel button at the bottom of the page. You will then receive an excel file with all of the patients that match your filter criteria. Please note that general information, intake information, discharge information, and follow-up information are listed on separate tabs within the workbook.

Q: Should we enter all comorbid conditions that a patient has ever had? For example, if a patient had breast cancer several years ago, but has been treated and no longer has cancer, should this be entered as a comorbidity?

A: Only enter comorbid conditions that the patient has at the time of program entry. The Charlson Comorbidity Index was conceived as a way of identifying patients who were at risk for dying within a 30-day period of their hospitalization. As a way of identifying CR patients who may be “high risk”, we included the list of comorbidity conditions used to calculate the Charlson Index. Only include conditions that the patient is currently experiencing or are a chronic condition. Any conditions that have been treated and no longer exist should not be included.

NOTE: This and other fields within the registries are defined within the Definitions for Selected Data Elements documents for the Cardiac and Pulmonary Registries. We highly recommend that all programs regularly review these documents with all staff entering data to ensure data integrity and consistency. These resources are also available on the Registry User Resource Page here.
The AACVPR Outpatient Data Registries are sponsored by:

Founding Sponsor:

[Images of LSI, QUINTON, SCIFIT, and SCOTTCare]

The AACVPR Outpatient Pulmonary Rehabilitation Registry is endorsed by:

[Image of AACVPR logo]

If you have any questions, please call 312-321-5146 (Option 1) or email registry@aacvpr.org.